

Administration of Medicines Policy

Introduction

The purpose of this policy is to ensure that any medicines administered within Holy Trinity Pewley Down (HTPD) are done so in a safe and monitored environment. It has been developed using guidance from the DFES notes "Supporting pupils at school with medical condition" from December 2015.

Most children will at some time have short-term medical needs, perhaps entailing finishing a course of medicine such as antibiotics. Some children however have longer term medical needs and may require medicines on a long-term basis to keep them well, for example children with well-controlled epilepsy, diabetes or cystic fibrosis. Staff are expected to do what is reasonable and practical to support the inclusion of all pupils and ensuring that children with medical needs receive proper care and support in school. Parents should provide all necessary information about their child's medical needs to HTPD.

Aims of this policy

- 1) To ensure the safe administration of medicines to children where necessary and to help to support attendance
- 2) To ensure the on-going care and support of children with long term medical needs via a Healthcare Plan (see Appendix 2)
- 3) To explain the roles and responsibilities of school staff in relation to medicines
- 4) To clarify the roles and responsibilities of parents in relation to children's attendance during and following illness
- 5) To outline to parents and school staff the safe procedure for bringing medicines into school when necessary and their storage
- 6) To outline the safe procedure for managing medicines on school trips

Roles and responsibilities of the headteacher

- 1) To bring this policy to the attention of school staff and parents and to ensure that the procedures outlined herein are put into practice
- 2) To ensure that there are sufficient First Aiders and appointed persons for the school to be able to adhere to this policy
- 3) To ensure that staff receive appropriate support and training specific to the individual needs of each child
- 4) To ensure that parents are aware of the school's Administration of Medicines Policy
- 5) To ensure that this policy is reviewed regularly

Roles and responsibilities of HTPD staff

As a school, we aim to ensure that we have sufficient information about the medical condition of any child with long-term medical needs and will request meetings with parents and recognised medical practitioners if necessary e.g. the diabetes nurse from time to time. HTPD is well supported by the School Nurse who provides staff with advice.

School staff will

- 1) follow the procedures outlined in this policy using the appropriate forms
- 2) arrange to complete a Healthcare Plan (see Appendix 2) in conjunction with parents and relevant healthcare professionals for children with complex or long term medical needs

- 3) share medical information as necessary within HTPD to ensure the safety of a child (the central register must be updated annually or in the event of a change – see ‘Known Medical Conditions’ below)
- 4) maintain confidentiality as far as possible
- 5) take all reasonable precautions to ensure the safe administration of medicines and record details of what medicine and the dosage is dispensed
- 6) contact parent/carer regarding any concerns without delay
- 7) contact emergency services if necessary without delay
- 8) keep the office medicine cabinet and first aid boxes stocked with supplies
- 9) perform monthly checks to ensure that all medication that HTPD holds is in date and when it’s 4 weeks to the expiry date to contact parents and ensure that replacement stocks are brought into school
- 10) Educational Visits Leader – see ‘Residential Visits’ below
- 11) Sports Leaders – see ‘Sporting Activities’ below

If a child refuses to take medicine, staff must not force them to do so. The refusal should be recorded and parents informed.

Roles and responsibilities of parents/carers

Parents/carers have the prime responsibility for their child’s health and should provide HTPD with information about their child’s medical condition. This should be done upon admission or when their child first develops a medical need. Medicines should normally be administered at home and only be taken into school when absolutely necessary (where it would be detrimental to the child’s health, or would greatly impact on a child’s school attendance, if the medicine were not taken during the school day). In line with government guidelines we would ask that children are not sent to school when they are clearly unwell or infectious.

Parents/carers are requested to

- 1) give the school adequate information about their children’s medical needs prior to a child starting school. A Healthcare Plan (Appendix 2) should be completed as well as an Asthma Care Plan (Appendix 3) and/or an Anaphylaxis Care Plan (Appendix 4). Where a child has food allergies, the catering form must be completed and a meeting will be arranged for the parents/carers to meet with the caterers.
- 2) follow the school’s procedure for bringing medicines into school and complete the ‘Request to Administer Medicine Form’ (Appendix 1)
- 3) only request medicines to be administered in school when essential
- 4) ensure that medicines are in date and that asthma inhalers are not empty
- 5) immediately notify the school of changes in a child’s medical needs, e.g. when medicine is no longer required or when a child develops a new need
- 6) Assume responsibility for the safe return of expired medicines and any sharps to a pharmacy

Some children may self-administer medication, e.g. insulin under the supervision of school staff, if this has been directed by the parent/carer when filling in the Healthcare Plan (Appendix 2)

Parents may come to the school office to administer medicines if necessary.

Prescribed Drugs

- Medicines should only be taken to school where it would be detrimental to a child’s health if the medicine were not administered during the school day. HTPD can only accept medicines that have been prescribed by a health professional. Medicines should always be provided in the original container dispensed by a pharmacist and include the prescriber’s instructions for administration.
- Parent/carer should complete and sign a ‘Request to Administer Medicine Form’ (Appendix 1).
- Medicines will be stored in a locked cabinet during the day or a locked fridge where necessary.
- A record will be made of when the medicine was dispensed.

- Parent/carer should make arrangements to collect the medicine from the school office at the end of the day unless alternative arrangements are made with the school staff. Medicines will not be handed to a child to bring home unless agreed as in Healthcare Plan (Appendix 2).

Non Prescribed drugs

- HTPD will only administer non-prescribed drugs (e.g. paracetamol, ibuprofen and anti-histamine) where parents have brought in the medicine and signed a 'Request to Administer Medicine Form' (Appendix 1).
- If a child is unwell during the day but not so ill that they need to be sent home, we will contact the parent/carer. If directly requested to do so, we will administer a non-prescribed drug from the school supply.
- Staff will always check with the parent/carer what dosage is to be dispensed and the time of a previous dose (if any) being taken.
- A record will be made of when the medicine was dispensed.

Self-Management

- Older children with a long-term illness should, whenever possible, assume complete responsibility under the supervision of their parent. Children develop at different rates and so the ability to take responsibility for their own medicines varies. This should be borne in mind when making a decision about transferring responsibility to a child or young person. There is no set age when this transition should be made. There may be circumstances where it is not appropriate for a child of any age to self-manage. Health professionals need to assess, with parents and children, the appropriate time to make this transition.
- Usually all medicines will be stored in the school First Aid fridges. Once children assume responsibility for self-medicating, parents/carers will be required to complete a revised Healthcare Plan (Appendix 2) which must detail where the medicines are to be stored during the school day if they are not to be stored in the First Aid fridges.

Residential Visits

- Children with medical needs are given the same opportunities as others. Staff may need to consider what is necessary for all children to participate fully and safely on school trips. If staff are concerned about whether they can provide for a child's safety, or the safety of other children on a visit, they will seek parental views and medical advice from the school health service or the child's GP. In line with HTPD's SEND policy we will make reasonable adjustments to enable children with medical needs to participate fully and safely on visits. Any risk assessments undertaken will include the needs of such children.
- Staff supervising excursions are responsible for ensuring that arrangements are in place for any child with medical needs prior to a trip taking place, including ensuring that asthma inhalers, epipens, etc are carried as required. A copy of any relevant health care plan should be taken on the trip in the event of the information being needed in an emergency (trips risk assessments should detail this).
- Where controlled drugs are in use, specific arrangements need to be made with regard to security of the drugs, directions for taking it and a separate Healthcare Plan needs to be drawn up (Appendix 2).
- The designated school First Aider on the trip will administer any medicines required and record the details on the School Trips Medical Form. This form and any unused medicines will be returned to the office or parent/carer on return to the school office.

Sporting Activities

- Most children with medical conditions can participate in physical activities and extracurricular sport. There should be sufficient flexibility for all children to follow in ways appropriate to their own abilities. For many, physical activity can benefit their overall social, mental and physical health and well-being. Any restrictions on a child's ability to participate in PE should be recorded in school data. The school is aware of issues of privacy and dignity for children with particular needs.
- Some children may need to take precautionary measures before or during exercise, and may also need to be allowed immediate access to their medicines such as asthma inhalers.

Known medical conditions

- A central register, with photographs, will be distributed to all teachers and relevant support staff at the beginning of the academic year. A copy will be placed in the staffroom to ensure that all teaching staff, lunchtime supervisors and support staff have access to the information.
- If supply staff are asked to cover a class, it will be the responsibility of the member of staff showing the supply teacher to the room to show them where the list is held.

Training

- Suitable training should be identified during the development or review of individual healthcare plans. Some staff may already have some knowledge of the specific support needed by a child with a medical condition and so extensive training may not be required. Staff who provide support to pupils with medical conditions should be included in meetings where this is discussed. Training should be sufficient to ensure that staff are competent and have confidence in their abilities to support pupils with medical conditions and fulfil the requirements set out in the individual healthcare plans.
- All Office Staff are required to undergo First Aid training from an accredited training body every 3 years, although it is recognised that this in itself does not constitute appropriate training in supporting children with medical conditions.
- Staff will receive refresher training every two years on the common conditions of Asthma, Epilepsy, Diabetes and Anaphylaxis.

Confidentiality

- All school staff will always treat medical information with respect and confidentiality. The office staff, SENCO and class teachers will always have medical information shared with them as well as support staff working directly with children with medical conditions.
- HTPD will share information regarding food allergies with the catering company. Parents/carers will be invited to meet with the Catering Manager to discuss their child's needs from a catering perspective.

Staff medicines

Staff members who might need to self-administer any prescription or non-prescription medicines should ensure that they are safely stored in a locked drawer or cabinet. If it is not possible to do this in the classroom, the medicine should be clearly named and labelled and stored in the main school office wall cabinet.

Review

The Governing Body of HTPD first adopted this policy in 2010. It will be reviewed biennially, or more regularly in the light of any significant new developments.

Date reviewed: January 2021

Date last reviewed: June 2023

Date for next review: June 2025

Signed:

Mark Sharman

Governor of Holy Trinity Junior Pewley Down Infant School

ECMS Committee Chair

Request for school to administer medication

The school will not give your child medicine unless you complete and sign this form.

DETAILS OF PUPIL

Surname: _____

Forename(s): _____

Address: _____

Male / Female (delete as appropriate) Date of Birth: _____ Class: _____

Condition or illness: _____

MEDICATION

Name/Type of Medication (as described on the container) _____

For how long will your child take this medication: _____

Date dispensed: _____

Full Directions for use:

Dosage and method: _____

Timing: _____

Special Precautions: _____

Side Effects: _____

Self Administration: _____

Procedures to take in an Emergency: _____

CONTACT DETAILS:

Name: _____

Daytime Telephone No: _____

Relationship to Pupil: _____

Address: _____

I understand that I must deliver the medicine personally to the school office and accept that this is a service which the school is not obliged to undertake.

Signature(s): _____

Relationship to pupil: _____

Date: _____

Healthcare Plan for a Pupil with Medical Needs

(to be updated annually or where there is a change in condition)

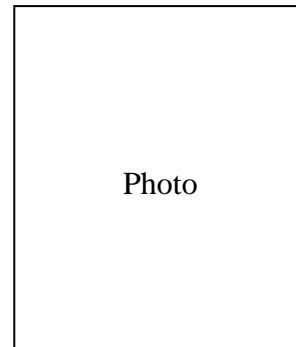
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Name: _____

Date of birth: _____

Class: _____

Medical diagnosis or condition:



_____ Date: _____

Review date: _____

Clinic/Hospital Contact

Name _____

Phone No. _____

GP Contact Details

Name _____

Phone No. _____

Describe condition and give details of pupil's individual symptoms:

Name of any medication that needs to be taken at school together with dose, method of administration, when to be taken, side effects, contra-indications, administered by/self administered with/without supervision:

Describe what constitutes an emergency and the action to be taken if one occurs:

Arrangements for school trips – not residential:

Arrangements for residential school trips:

Parent/carer signature: _____ Date: _____

Parent/carer name: _____

Office Use:

Date received: _____

Plan developed with school representative: _____

Person responsible for providing support in school: _____

Training required: _____

Added to the Central Register :

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Appendix 3

Asthma Care Plan

Child's Name			
Date of Birth			
Medication			
Please list all the medication your child has for their asthma			
Which medication would you like us to keep at school?			
Have you provided us with a spacer (eg aerochamber)		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you provided us with a Peak Flow Meter?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
<p>If your child has any difficulty breathing (eg wheezy, tight chested, short of breath), please describe how you would like us to use their inhaler:</p> <p>Name of inhaler:</p> <p>Number of puffs to give:</p> <p>Any other actions to take:</p>			
If we need to contact you			
Who should we contact?			
Contact number			
We will always contact you if we are concerned, but are there any specific circumstances where you would like us to get in touch			



Child's Name			LEARN TO LIVE
Date of Birth			
Allergies			
What is your child allergic to?			
Medication			
Please list all the medication your child has for their allergies			
Which brand of adrenaline pen have you provided for the school?			
Epipen <input type="checkbox"/> Jext <input type="checkbox"/> Emerade <input type="checkbox"/> Other <input type="checkbox"/>			
Which antihistamine have you provided for the school?			
Name:			
Strength (How many mg/ml):			
How many ml should we administer if we need to use it?			
Type of allergic reaction we might expect			
What symptoms does your child get if they have an allergic reaction?			
Swelling <input type="checkbox"/> Breathing difficulty <input type="checkbox"/> Collapse <input type="checkbox"/> Other <input type="checkbox"/>			
Please give details:			

Anaphylaxis Care Plan (page 2/2)

Child's Name

Date of Birth

If your child has a SEVERE allergic reaction, the staff will always:

1. Use the adrenaline pen
2. Call an ambulance
3. Give antihistamine
4. Contact you

Are there any other actions you would like us to take for a severe reaction:

Other reactions

If your child has less serious reaction, what action would you like us to take?

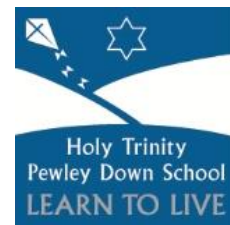
If we need to contact you

Who should we contact?

Contact number:

We will always contact you if we are concerned, but are there any specific circumstances where you would like us to get in touch?

Any other comments



Request for pupil to carry his/her medication

This form must be completed by parents/guardian

Pupil's Name: _____

Address: _____

Condition or illness: _____

Name of Medicine: _____

Procedures to be
taken in an emergency _____

CONTACT INFORMATION

Name: _____

Daytime Phone No: _____

Relationship to child: _____

I would like my son/daughter to keep his/her medication with him/her for use as necessary.

Signed: _____

Relationship _____

to child: _____

Date: _____

Appendix 6 – Residential Medical Form

**Residential Trip to [Insert name of Trip]
Monday [Insert date] – Friday [Insert date] 20XX**

1. Please ensure that your child has a current tetanus inoculation (valid **insert same dates as above**)
2. Does your child have any allergies? **YES / NO**
a) Food ☐ b) Tablets or medicines ☐
c) Plasters ☐ d) Other ☐
Details
3. Does your child have any dietary requirements e.g. medical/religious? **YES / NO**
If yes, please give details.....
4. Does your child have asthma? **YES / NO**
If yes, please bring **two** of each of their inhalers, plus a spacer if required
5. Does your child suffer from travel sickness? **YES / NO**
If yes, please supply usual medication
6. Has your child ever fainted? **YES / NO**
7. Has your child wet the bed recently? **YES / NO**
8. Does your child sleepwalk? **YES / NO**
9. Has your daughter started her periods **YES / NO**
10. If it is necessary may we give your child paracetamol **YES / NO**
 ibuprofen **YES / NO**
 antihistamine cream **YES / NO**
 antihistamine liquid **YES / NO**
11. Does your child take any regular medication (during the day or at night)? Please give details
.....
12. Does your child normally administer their own treatment? **YES / NO**
13. Any other information relating to specific health conditions or religious requirements:
.....
.....
14. I authorise the trip leader to allow my child to receive any emergency dental, medical or surgical treatment (including anaesthetic) as considered necessary by the medical authorities present

Name of child Class

Signature of Parent/Guardian Date

Contact telephone numbers Day Eve

Emergency number if different from above

Address and telephone number of GP

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